

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

UNSTARRED QUESTION NO:4048  
ANSWERED ON:20.03.2015  
HIGH COST OF MEDICAL CARE  
Ahlawat Smt. Santosh

**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

- (a) whether expenditure on healthcare system as percentage of Gross Domestic Product (GDP) in the country is quite low as compared to China, Brazil, Japan and America;
- (b) if so, the details thereof indicating the expenditure incurred in this regard during each of the last three years and the current year along with the reasons for low spending, State/UT-wise;
- (c) whether the Government proposes to increase the expenditure on health sector as percentage of GDP to remove the shortcomings in the healthcare system;
- (d) if so, the details thereof indicating the channels likely to be mobilised to meet the requirement of funds in this regard; and
- (e) the steps taken/proposed to be taken by the Government to provide better healthcare facilities to all the citizens of the country?

**Answer**

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA)

(a): As per World Health Statistics 2014 published by World Health Organization (WHO), General Government expenditure on health as percentage of Gross Domestic Product (GDP) in 2011 for India is 1.19% as compared to China 2.85%, Brazil 4.07%, Japan 8.21% and United States of America 8.46%.

(b): A statement showing State-wise Allocation and Expenditure for the year 2011-12, 2012-13 and allocation for 2013-14 and 2014-15 is annexed. Public expenditure on health in India is based inter-alia, on the availability of financial resources keeping in view competing demands on the resource of the Government and the absorptive capacity of the health sector.

(c) & (d): The Twelfth Five Year Plan projections envisage increasing total public fund, plan and non plan on core health to 1.87 per cent of GDP by the end of Twelfth Plan. The draft health policy 2015 envisages general taxation as the major source of financing of the public health sector. An increase in economic growth makes available increased resources for funding the health sector. The funding of public health expenditure presently is met from Government budgetary resources.

(e): The steps taken by the Government of India for providing better healthcare facilities to the all citizens of the country inter-alia, include:

# Initiatives under the National Health Mission (NHM) with a view to provide accessible affordable, accountable, effective and quality healthcare services especially to the poor and vulnerable sections of the population. Primary health care in India is provided free of cost in the public health facilities through a nationwide network of Community Health Centres (CHCs), Primary Health Centres (PHCs) and Sub Centres (SCs).

# Free care is provided for family welfare services.

# Janani Shishu Suraksha Karyakaram (JSSK) envisages free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home, for all pregnant women delivering in public health institutions.

# National Urban Health Mission (NUHM) with focus on primary health care needs of urban population particularly slum dwellers and other marginalized groups.

# Mainstreaming of Indian System of Medicine and Homeopathy.

# Making available tertiary health care services in the public sector through strengthening of hospitals, establishment of AIIMS institutions in the States and up-gradation of existing Government medical colleges across the country.

# Making available quality generic medicines at affordable prices to all, under 'Jan Aushadhi Campaign', in collaboration with the State Governments.

# Rashtriya Swasthya Bima Yojana (RSBY) which provides for smart card based cashless health insurance including maternity benefit on family floater basis to Below Poverty Line (BPL) families (a unit of five) in the unorganized sector.

The Government have also taken several steps in the direction of preventive health care, which inter-alia include Universal Immunization of children against 7 diseases; Pulse Polio Immunization; Family Planning services; Maternal and Reproductive Health Services; Child Health services that include both home based and facility based New born Care; Adolescent Reproductive and Sexual Health (ARSH) services; Investigation/screening and treatment for Malaria; Kala-azar, Filariasis, Dengue; Japanese Encephalitis and Chikungunya; Detection and treatment for Tuberculosis including MDR-TB; Detection and treatment for Leprosy; Detection, treatment and counseling for HIV/AIDS; Cataract surgery for Blindness control.

Further, under Rashtriya Bal Swasthya Karyakram (RBSK) support is being provided to States/ UTs for child health screening and early intervention services through early detection and early management of common health conditions classified into 4 Ds i.e. Defects at birth, Diseases, Deficiencies, Development delays including disability. A comprehensive National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular diseases and Stroke (NPCDCS) for activities including health promotion, early detection and treatment of Cancer, Diabetes, Cardiovascular diseases and Stroke, has also been initiated.